Exhibit 41

	☑ REPORT OF LOBBYIS	T EMPLOYER		
	(Government Code Sec	ction 86116)		1/4
	or			1
	☐ REPORT OF LOBBYIN	G COALITION	I	
	(2 Cal. Code of Regs. Se			
FORM 635 1993	IMPORTANT: Lobbying Coal completed Form 635-C		ch a	·
RE	PORT COVERS PERIOD FROM 10/01/200	₀₄ THROUGH	12/31/2004	FOR OFFICIAL USE ONLY
	MULATIVE PERIOD BEGINNING	01/01/2003		
CO	4			A .
or information required to be anual on Lobbying Disclosur	TYPE OR PRINT provided to you pursuant to the Information Practi e Provisions of the Political Reform Act.		I <u>nformation</u>	В
ME OF FILER:			2000	
Cl,Inc.				
JSINESS ADDRESS: (Number	and Street) · (City)	(State)	(Zip Code)	TELEPHONE NUMBER:
	San Franc		94105	
ART I - LEGISLATIVE O	R STATE AGENCY ADMINISTRATIVE AC	TIONS ACTIVELY	LOBBIED DURIN	G THE PERIOD
	SUMMARY OF PAY	MENTS THIS PE	RIOD	
A. Total Payments to In-I-	louse Employee Lobbyists (Part III, Section A, Col	umn 1)	\$	0.00
B. Total Payments to Lob	bying Firms (Part III, Section B, Column 4)		9	22000.00
	s (Part III, Section C)			
D. Total Other Payments	to Influence (Part III, Section D)		9	0.00
GRAND TOTA	AL (A + B + C + D above)			22059.00
E. Total Payments in Cor	nnection with PUC Activities (Part III, Section E)			0.00
F. Campaign Contribution	ns: Part IV completed and attached	X No cam	paign contributions n	nade this period
1. Campaign Consider		Bootenad	,	
tion contained her	VERIFIC sonable diligence in preparing this Report. I rein and in the attached schedules is true and o alty of perjury under the laws of the State of C	have reviewed the F complete.		
Executed on (Date) 01/25/2005	At (City and State) San Francisco,CA		By (Signature of Er Richard Sever	nployer or Responsible Officer) Y
Name of Employer or Responsible Richard Severy	le Officer (Type or Print)		Title Director	

PERIOD COVERED: 10/01/2004	12/31/2	004				
NAME OF FILER: MCI.lnc.						
PART II - PARTNERS, OWNERS, AND EMPLO REPORT (See instructions on reverse.)	YEES WHOSE	"LOBBYIST RE	PORTS" (FORM 615) ARE	ATTACHED TO	THIS	
Name and Title		Name and	Title			
			,			
			·			
If more space is needed, check box and attach continua	tion sheets.					
PART III - PAYMENTS MADE IN CONNECTION	N WITH LOBBY	YING ACTIVITIE	s			
A. PAYMENTS TO IN-HOUSE EMPLOYEE LOBBYISTS (See instructions on reverse. Also enter the Amount This Period (Column 1) on Line A of the Summary of Payments section on page 1.)			(1) Amount This Period		(2) Cumulative Total To Date	
			\$ 0.00	\$	0.00	
B. PAYMENTS TO LOBBYING FIRMS (Inc.	luding Individual C	Contract Lobbyists)				
Name and Address of Lobbying Firm/Independent Contractor	(1) Fees & Retainers	(2) Reimbursements of Expenses	(3) Advances or Other Payments (attach explanation)	(4) Total This Period	(5) Cumulative Total to Date	
Lucas Advocates	18000.00	0.00	none 0.00	18000.00	132457.58	
Sacramento CA 95814 Spencer - Roberts & Associates Inc.	4000.00	0.00	none 0.00	4000.00	40000.00	
Washington DC 20037						
If more space is needed, check box and attach continuation sheets	Also ent	. THIS PERIOD ter the total of Colu ry of Payments sec	mn 4 on Line B of the	\$ 22000	0.00	

PERIOD COVEREI	D: <u>10/01/2004</u>	12/31/2004
NAME OF FILER:	MCI,Inc.	

Date	Name and Address of Payee	verse.) Name and Official Position of Reportable Persons and Amount Benefiting Each		Description of Consideration	Total Amount of Activity	
0/13/2004	Vallejos Taqueria	Dan Skopec	\$ 14.75	Lunch	\$	59.00
	Sacramento CA 95814	Depty Cabinet Secty Govs Of - fice			•	
	Gustanionic G.Y. ess.					
	·					
				·		

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	more space is needed, check box and attach ntinuation sheets.	,	TOTAL SECTION C Also enter the total of the Summary of Pay	(Activity Expenses) f Section C on Line C of ments section on page 1.	\$	59.0
□ NO.	HER PAYMENTS TO INFLUENCE L TE: State and local government agencies achment Form 640 instead.	EGISLATIVE OR ADMINISTRATIV do not complete this section. Check box	E ACTION and complete			
1. PAYMENTS TO LOBBYING COALITIONS (NOTE: You must attach a completed Form 630 to this Report.) \$ 0.00				Ţ		
2.	OTHER PAYMENTS			TOTAL SECTION D (1 + 2) Also enter the total of Section D on Line D of the Summary of Payments section on page 1.	\$	0.0
BE	YMENTS IN CONNECTION WITH A FORE THE CALIFORNIA PUBLIC I	JTILITIES COMMISSION Also, enter	RATEMAKING I	PROCEEDINGS E on Line E of the	\$	0.0

PERIOD COVERED: 10/01/2004 12/31/2004 NAME OF FILER: MCI,Inc.					
NAME OF FIL	ER: MOJ,IIIC				
made to or on	CAMPAIGN CONTRIBUTIONS MADE (Monetary and non-monetary behalf of <u>state</u> candidates, elected state officers and any of their controlled commit officers must be reported in A or B below.)				
A. If the contributions made by you during the period covered by this report, or by a committee you sponsor, are contained in a campaign disclosure statement which is on file with the Secretary of State, report the name of the committee and its identification number, if any, below. Name of Major Donor or Recipient Committee Which Identification Number if					
	A Campaign Disclosure Statement:	Recipient Committe	4040400		
MCI,Inc	Form 461; MCI Employees California PAC				
B. Contributions of \$100 or more which have not been reported on a campaign disclosure statement, including contributions made by an organization's sponsored committee, must be itemized below.					
Date	Name of Recipient	I.D. Number if Committee	Amount		
			\$		
			\$		
			\$		
		,	\$		
			\$		
			\$		
			\$		
			\$		
			\$		
			\$		
If more space is needed, check box and attach continuation sheets.					